PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0910502	NEW FAIRFIELD WPCA				NTNC	275	L	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
4 BRUSH HILL R	OAD (ROUTE 39)	Connections	3					

Towns Served: NEW FAIRFIELD			
Monitoring I	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0060	0)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Haloacetic Acids (2456)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
96RT37 DRS REST RM (NFDR019)	1/1/18 - 12/31/18	9/1-9/30	Complete
	1/1/19 - 12/31/19	9/1-9/30	
	1/1/20 - 12/31/20	9/1-9/30	
Total Trihalomethanes (2950)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
SHAWS BREAK RM SINK (NFSH010)	1/1/18 - 12/31/18	9/1-9/30	Complete
	1/1/19 - 12/31/19	9/1-9/30	
	1/1/20 - 12/31/20	9/1-9/30	
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		10 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/18 - 12/31/18		Complete
	1/1/19 - 6/30/19		
	7/1/19 - 12/31/19		
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		
Nitrate And Nitrite (NOX)		1 re	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Page 1

Schedule Generation Date: 4/11/2019

	Water Quality Monitoring and Compliance Schedule							
PWS ID	PWS ID PWS Name				ssification	Population	Owner Type	Primary Source
CT0910502	CT0910502 NEW FAIRFIELD WPCA				NTNC	275	L	GW
Local Address (v	Service	Residen	tial	l Commercial Industr		Combined Agricultural		
4 BRUSH HILL R	OAD (ROUTE 39)	Connections	3					

Connecticut Department of Public Health Drinking Water Section

Towns Served: NEW FAIRFIELD

Towns Served: NEW FAIRFIELD			
Monitorin	g Requirements		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Water System Facility: WELL 1 (WSF ID: 10430)			
E. Coli (3014)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL (2)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: WELL 2 (WSF ID: 48685)			
E. Coli (3014)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL 2 (2)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		•
	7/1/19 - 9/30/19		
Water System Facility: WELL 3 (WSF ID: 48687)			
E. Coli (3014)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
WELL 3 (2)	10/1/18 - 12/31/18		Complete
· 、	1/1/19 - 3/31/19		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		Complete

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0910502	NEW FAIRFIELD WPCA				NTNC	275	L	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
4 BRUSH HILL R	OAD (ROUTE 39)	Connections	3					

Towns Served: NEW FAIRFIELD

Other Compliance Schedules								
Compliance Schedule Activity	Due Date	Achieved Date						
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2010							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2011							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2011							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/30/2012							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2012							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2013							
CROSS CONNECTION SURVEY REPORT	3/1/2019							

CROSS CO	INNECTION SURVEY REPORT		3/1	1/2019				
	Wat	er System Facili	ty and Sampling P	oint Ir	nventor	У		
Water					Total	Lead and		
System	Water System Facility		Sampling Point		Coliform	Copper		Stage
Facility ID)	ID	Description	Status	Rule	Rule Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		NFDR019	96RT37 DRS REST RM	Α	Υ	1		Υ
		NFDR020	96RT37 THERAP R RM	Α	Υ	1		
		NFLIB017	LIBRARY REST RM	Α	Υ	1		
		NFPL021	STARBUCKS REST RM	Α	Υ	1		
		NFPL022	NAIL SALON REST RM	Α	Υ	1		
		NFPL023	LIQUOR STORE REST R	Α	Υ	1		
		NFSH006	SHAWS FLORIST	Α	Υ	1		
		NFSH007	SHAWS PROD H SINK	Α	Υ	1		
		NFSH008	SHAWS MENS RM SINK	Α	Υ	1		
		NFSH009	SHAWS LADIES RM SINK	Α	Υ	1		
		NFSH010	SHAWS BREAK RM SINK	Α	Υ	1		Υ
		NFSH011	SHAWS BAKERY H SINK	Α	Υ	1		
		NFSH012	SHAWS GROCERY H SIN	Α	Υ	1		
		NFSH013	SHAWS MEAT H SINK	Α	Υ	1		
		NFSH014	SHAWS SEAFOOD H SIN	Α	Υ	1		
		NFSH015	SHAWS DELI H SINK	Α	Υ	1		
		NFSH016	SHAWS TRPL SINK	Α	Υ	1		
		NFTH001	KITCHEN	Α	Υ	1	Υ	
		NFTH002	LWR LVL R RM	Α	Υ	1		
		NFTH003	LADIES RM	Α	Υ	1		
		NFTH004	MENS RM	Α	Υ	1		
		NFTH005	FIN DEPT KITCHEN	Α	Υ	1		
		NFTH018	TOWN HALL ANNEX	Α	Υ	1		
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10430	WELL 1	2	WELL	Α				

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connectic	ut Depa	rtment o	of Public	Health	Drii	nking	Water	Sec	ction	
		_	lity Moni								
PWS ID	PWS Name					Classif	ication	Population	Own	er Type P	rimary Source
CT0910502	NEW FAIRFIELD	WPCA				NT	NC	275		L	GW
Local Address (v	vhere applicable)			Service	Resider	ntial Co	mmercia	l Industr	ial (Combined	Agricultural
4 BRUSH HILL R	OAD (ROUTE 39)			Connection	ns 3						
Towns Served: I	NEW FAIRFIELD										
		Water Sy	ystem Faci	ility and S	ampling	g Poin	t Inver	ntory			
Water							To	tal Lead	and		
-,	er System Facility	,	Sampling Poin				Colif		•		Stage
Facility ID			ID	Description	1	Sto	rtus Ru	ile Rule	Tier	Asbestos	WQP 2 DBPR
48685 WELI	L 2		2	WELL 2			A				
48687 WELI	L 3		2	WELL 3			A				
	FAIRFIELD WATE	R									
55715 ATM	OSPHERIC STORA	.GE									
			Certifie	d Operato	r Inforn	natior	1				
Water System	Facility: NEW	FAIRFIELD \	NATER TREA	TMENT PLA	NT (WSF I	D: 486	93)				
Facility Classific	ation: CLASS 1 T	REATMENT P	LANT								Certification
Operator Name	•		Operator Ty	ре	Certification	on(s)					Expiration
FOLEY, JAMES			CHIEF OPERA	TOR	WATER TR	EATME	NT PLANT	OPERATO	R - CLA	ASS II	3/31/2020
			Co	ntact Info	rmation	า					
Name				Organization						Job Title	
New Fairfield											
Mailing Address	Line One		Mailing Addre	ess Line Two				City		State	Zip Code
4 Brush Hill Rd							New Fa	irfield		СТ	06812
Business Phor	ne Extension	Fax	Мо	bile Phone	Emergenc	y Phone	Email A	ddress			
Contact Role(s):	Owner		1	'							
Name				Organization						Job Title	
Ms. Susan Chap	man			Town of New	Fairfield			First Sele	ctman	l	
Mailing Address	Line One		Mailing Addre	ess Line Two				City		State	Zip Code
1 Brush Hill Roa	Ч						New Fa	irfield		СТ	06812

4 Brush Hill Road 06812 New Fairfield CT **Business Phone** Fax Mobile Phone Emergency Phone Email Address Extension 203-312-5600 schapman@newfairfield.org Contact Role(s): Administrative Contact, Legal Contact Name Organization Job Title Ms. Patricia Del Monaco Town of New Fairfield First Selectman Mailing Address Line One Mailing Address Line Two Zip Code City State 4 Brush Hill Rd New Fairfield CT 06812 **Business Phone** Mobile Phone Emergency Phone Email Address Extension Fax 203-240-0143 pdelmonaco@newfairfield.org 203-312-5600 203-312-5612

Contact Role(s): Owner

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

	water Quality Mon	toring an	u con	iipiianee i	Jeneau	i C	
PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
СТ0910502	NEW FAIRFIELD WPCA	NTNC	275	L	GW		
Local Address (where applicable)	Service	Resider	ntial Commerc	ial Industri	ial Combin	ed Agricultural
4 BRUSH HILL R	OAD (ROUTE 39)	Connections	3				
Towns Served:	NEW FAIRFIELD				·	·	

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0910532	NEW FAIRFIELD HIGH/MIDDLE SCHOOL				NTNC	1,791	L	GW
Local Address (where applicable)		Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
54 GILLOTTI RO	AD	Connections	1					

Towns Served: NEW FAIRFIELD			
Monitor	ing Requirements		
Water System Facility: DISTRIBUTION SYSTEM HIGH & N	NIDDLE SCHOOL (WSF ID: 006	500)	
Chlorine Residual (0999)		2 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		
	1/1/20 - 12/31/28		
Total Haloacetic Acids (2456)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
K DBL SINK L (NFHS004)	1/1/18 - 12/31/18	9/1-9/30	Complete
	1/1/19 - 12/31/19	9/1-9/30	
	1/1/20 - 12/31/20	9/1-9/30	
Total Trihalomethanes (2950)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
SCIENCE ROOM 202 (NFMS003)	1/1/18 - 12/31/18	9/1-9/30	Complete
	1/1/19 - 12/31/19	9/1-9/30	
	1/1/20 - 12/31/20	9/1-9/30	
Total Coliform (3100)		2 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Lead And Copper (PBCU)		10 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
	1/1/17 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/22	6/1-9/30	

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	donnectical Department	or rabile r	Carci		311111111	, water	Decemon	
	Water Quality Mon	itoring an	d Con	npl	liance S	Schedul	e	
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0910532	NEW FAIRFIELD HIGH/MIDDLE SCHOOL				NTNC	1,791	L	GW
Local Address (\	where applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
54 GILLOTTI RC)AD	Connections	1					
Towns Served: I	NEW FAIRFIELD							·

Connecticut Department of Public Health Drinking Water Section

Towns Served: NEW FAIRFIELD							
Monitoring	Requirements						
Water System Facility: DISTRIBUTION SYSTEM HIGH & MIDDLE SCHOOL (WSF ID: 00600)							
Physical Parameters (PPS)		2 rou	tine (RT) per month				
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete				
	12/1/18 - 12/31/18		Complete				
	1/1/19 - 1/31/19		Complete				
	2/1/19 - 2/28/19		Complete				
	3/1/19 - 3/31/19		Complete				
	4/1/19 - 4/30/19						
	5/1/19 - 5/31/19						
	6/1/19 - 6/30/19						
	7/1/19 - 7/31/19						
	8/1/19 - 8/31/19						
	9/1/19 - 9/30/19						
	10/1/19 - 10/31/19						
Water System Facility: ENTRY POINT (WSF ID: 00700)							
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years				
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
ENTRY POINT (3)	1/1/17 - 12/31/19						
	1/1/20 - 12/31/22						
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year				
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete				
	1/1/19 - 12/31/19						
	1/1/20 - 12/31/20						
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years				
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
ENTRY POINT (3)	1/1/17 - 12/31/19						
	1/1/20 - 12/31/22						
Organic Chemicals (VOCS)		1 rout	ine (RT) per quarter				
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status				
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete				
	1/1/19 - 3/31/19		Complete				
	4/1/19 - 6/30/19						
	7/1/19 - 9/30/19						

Monthly Water System Facility (WSF) Level Monitoring Requirements

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0910532	NEW FAIRFIELD HIGH/MIDDLE SCHOOL				NTNC	1,791	L	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
54 GILLOTTI RO	AD	Connections	1					

Towns Served: NEW FAIRFIELD

Water System Facility:	TREATMENT PLANT (WSFID: TP001)					
Analyte	Monitoring Requirement (Summary T	уре)	Operating Limit	t	Samples Req/Month		
Chlorine	Entry Point RDC (EPRD)		Minimum: 0.6 MG/L		Continuous		
Start Date: 10/1/201	1	Compliance History: Opera		Compliance History: Oper		Operating Limit	Monitoring
		Monitoring	Period	Compliance Status	: Compliance Status:		
		11/1/2018 -	11/30/2018	Υ	Υ		
		12/1/2018 -	12/31/2018	Υ	Υ		
		1/1/2019 - 1	/31/2019	Υ	Υ		
		2/1/2019 - 2	/28/2019	Υ	Υ		
		3/1/2019 - 3	/31/2019	Υ	Υ		
		4/1/2019 - 4	/30/2019				

Other Compliance Schedules

Compliance Schedule Activity

Due Date

Achieved Date

3/1/2020

CROSS CO	NNECTION SURVEY REPORT		3/1	1/2020				
	Water	System Facili	ity and Sampling P	oint In	ventor	у		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM HIGH & MIDDLE SCHOOL	4	NFHS004 - KITCHEN DI	А	Υ			
		4 - NFHS	HIGH SCHOOL DISTRIBU	Α				
		4 - NFMS	MIDDLE SCHOOL DISTRI	Α				
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		NFHS001	NURSES SINK	Α	Υ	1		
		NFHS002	WF NURSES SINK	Α	Υ	1	Υ	
		NFHS003	K HAND SINK	Α	Υ	1		
		NFHS004	K DBL SINK L	Α	Υ	1		Υ
		NFHS005	K DBL SINK R	Α	Υ	1		
		NFHS006	WF NEAR GYM	Α	Υ	1		
		NFHS007	L RM BY RM 209	Α	Υ	1		
		NFHS008	L RM OFFICE	Α	Υ	1		
		NFHS009	ART RM R SINK	Α	Υ	1		
		NFHS010	ART RM L SINK	Α	Υ	1		
		NFHS011	WF RM 109	Α	Υ	1		
		NFHS012	WF RM 223	Α	Υ	1		
		NFHS013	MAIN OFF R RM	Α	Υ	1		
		NFHS014	WM RM STAFF	Α	Υ	1		
		NFHS015	WM RM NEAR RM 210	Α	Υ	1		
		NFHS016	L RM STAFF ENT	Α	Υ	1		
		NFHS017	KITCHEN DI	Α	Υ			
		NFMS001	NURSES SINK	Α	Υ	1		
		NFMS002	STAFF LOUNGE	Α	Υ	1		

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Connecticut Department of Public Health Drinking Water Sewart Quality Monitoring and Compliance Schedule PWS ID PWS Name Classification Population Ownertographics Name Classification Population Ownertographics (where applicable) Service Residential Commercial Industrial Connections 1	ection
Water Quality Monitoring and Compliance Schedule PWS ID PWS Name Classification Population Ow CT0910532 NEW FAIRFIELD HIGH/MIDDLE SCHOOL NTNC 1,791 Local Address (where applicable) Service Residential Commercial Industrial	
PWS ID PWS Name Classification Population Ow CT0910532 NEW FAIRFIELD HIGH/MIDDLE SCHOOL NTNC 1,791 Local Address (where applicable) Service Residential Commercial Industrial	
CT0910532 NEW FAIRFIELD HIGH/MIDDLE SCHOOL NTNC 1,791 Local Address (where applicable) Service Residential Commercial Industrial	ner Type Primary Source
	L GW
Connections	Combined Agricultural
54 GILLOTTI ROAD Connections 1	
Towns Served: NEW FAIRFIELD	
Water System Facility and Sampling Point Inventory	
Water Total Lead and	
System Water System Facility Sampling Point Sampling Point Coliform Copper	Stage
, Status	Asbestos WQP 2 DBPR
NFMS003 SCIENCE ROOM 202 A	Υ
UPSTREAM WITHIN 5 SERVICE CON A	
00700 ENTRY POINT 3 ENTRY POINT A	
10434 WELL #3 2 WELL #3 A	
10435 WELL #2 2 WELL #2 A	
47804 ATMOSPHERIC STORAGE	
52293 WELL #4 2 WELL 4 A	
57825 PUMP FACILITY	
TP001 TREATMENT PLANT	
Certified Operator Information	
Water System Facility: DISTRIBUTION SYSTEM HIGH & MIDDLE SCHOOL (WSF ID: 00600)	
Facility Classification: CLASS 1 DISTRIBUTION SYSTEM	Certification
Operator Name Operator Type Certification(s)	Expiration
GRANT, SHANE CHIEF OPERATOR WATER TREATMENT PLANT OPERATOR - CI	LASS II 9/30/2020
DISTRIBUTION SYSTEM OPERATOR - CLASS	II 9/30/2020
Water System Facility: TREATMENT PLANT (WSF ID: TP001)	
Facility Classification: CLASS 1 TREATMENT PLANT	Certification
Operator Name Operator Type Certification(s)	Expiration
	LASS II 3/31/2020
FOLEY, JAMES CHIEF OPERATOR WATER TREATMENT PLANT OPERATOR - CI	
FOLEY, JAMES CHIEF OPERATOR WATER TREATMENT PLANT OPERATOR - CI Contact Information	
	Job Title
Contact Information	
Contact Information Name Organization	
Contact Information Name Organization Mr. Philip A. Ross New Fairfield Public Schools Director B&Gr	rounds
Contact Information Name Organization Mr. Philip A. Ross New Fairfield Public Schools Director B&Gr Mailing Address Line One Mailing Address Line Two City	rounds State Zip Code
Contact InformationNameOrganizationMr. Philip A. RossNew Fairfield Public SchoolsDirector B&GrMailing Address Line OneMailing Address Line TwoCity56 Gillotti RoadNew Fairfield	rounds State Zip Code CT 06812
Contact Information Name Organization Mr. Philip A. Ross New Fairfield Public Schools Director B&Gr Mailing Address Line One Mailing Address Line Two City 56 Gillotti Road New Fairfield Business Phone Extension Fax Mobile Phone Emergency Phone Email Address	rounds State Zip Code CT 06812
Contact InformationNameOrganizationMr. Philip A. RossNew Fairfield Public SchoolsDirector B&GrMailing Address Line OneMailing Address Line TwoCity56 Gillotti RoadNew FairfieldBusiness PhoneExtensionFaxMobile PhoneEmergency PhoneEmail Address203-312-5779203-312-5780203-994-0091pross@new-fairfield.k1	rounds State Zip Code CT 06812
Contact InformationNameOrganizationMr. Philip A. RossNew Fairfield Public SchoolsDirector B&GrMailing Address Line OneMailing Address Line TwoCity56 Gillotti RoadNew FairfieldBusiness PhoneExtensionFaxMobile PhoneEmergency PhoneEmail Address203-312-5779203-312-5780203-994-0091pross@new-fairfield.k1Contact Role(s):Administrative Contact	rounds State Zip Code CT 06812 12.ct.us

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Mobile Phone

New Fairfield

Emergency Phone Email Address

06812

4 Brush Hill Rd

Business Phone

Contact Role(s): Owner

Extension

Fax

	Connectic	ut Depa	irtme	nt of	Public	Health	Drir	ıking	Water	Section	
	Wa	ter Qua	lity M	onit	oring ai	nd Con	nplia	nce S	chedul	le	
PWS ID	PWS Name						Classif	ication	Population	Owner Type	Primary Source
CT0910532	NEW FAIRFIELD	HIGH/MIDD	LE SCHO	OL			NT	NC	1,791	L	GW
Local Address (w	nere applicable)				Service	Resider	ntial Co	mmerci	al Industri	al Combin	ed Agricultural
54 GILLOTTI ROA	D				Connection	1					
Towns Served: N	EW FAIRFIELD								·	·	
Name				Or	ganization					Job Titl	е
Ms. Susan L. Cha	pman			To	wn of New F	airfield			First Selec	ctman	
Mailing Address I	ine One		Mailing	Address	Line Two				City	State	Zip Code
Town Hall			Rt. 39, 4	Brush F	Hill Road			New Fa	irfield	СТ	06812
Business Phone	Extension	Fax		Mobile	e Phone	Emergency	/ Phone	Email A	ddress		
203-312-5600		203-312-	5610					schapn	nan@newfa	irfield.org	
Contact Role(s):	Legal Contact							•			

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

	<u> </u>			1				
PWS ID	PWS Name			Class	sification	Population	Owner Type	Primary Source
CT0915053	CONSOLIDATED & MEETING HOUSE HILL SCH	IOOL		1	NTNC	1,425	L	GW
Local Address (v	where applicable)	Service	Residen	ntial	Commercia	al Industri	al Combine	ed Agricultural
12 & 24 GILLOT	TI ROAD	Connections	3					

Towns Served: NEW FAIRFIELD			·
Monitori	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	00600)		
Asbestos (1094)		2 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		2 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Lead And Copper (PBCU)		10 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)			tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		, , , , , , , , , , , , , , , , , , ,
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Water System Facility: CONSOLIDATED SCHOOL ENTRY P			

Inorganic Chemicals (IOCS) 1 routine (RT) per three years Sampling Point (Sampling Point ID) **Monitoring Period Collection Period Compliance Status**

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Water Quality Monit				ر	,		
PWS ID	PWS Name		u don					Primary Source
CT0915053	CONSOLIDATED & MEETING HOUSE HILL SC	HOOL			NTNC	1,425	L	GW
Local Address (v	vhere applicable)	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural
12 & 24 GILLOT	TI ROAD	Connections	3					

Connecticut Department of Public Health Drinking Water Section

Towns Served: NEW FAIRFIELD

Coring Period 7 - 12/31/19 0 - 12/31/22	Collection Period	(RT) per three years Compliance Status
7 - 12/31/19	Collection Period	• • •
7 - 12/31/19		Compliance Status
0 - 12/31/22		
	1 rc	outine (RT) per year
toring Period	Collection Period	Compliance Status
8 - 12/31/18		Complete
9 - 12/31/19		
0 - 12/31/20		
	1 routine ((RT) per three years
oring Period	Collection Period	Compliance Status
7 - 12/31/19		
0 - 12/31/22		
	1 routine ((RT) per three years
oring Period	Collection Period	Compliance Status
7 - 12/31/19		Complete
0 - 12/31/22		
edules		
	oring Period 7 - 12/31/22 0 - 12/31/22 0 - 12/31/22 0 - 12/31/19	1 routine (coring Period Collection Period 7 - 12/31/19 0 - 12/31/22 1 routine (coring Period Collection Period 7 - 12/31/19 0 - 12/31/19 0 - 12/31/22

Other Compliance Schedules								
Compliance Schedule Activity	Due Date	Achieved Date						
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012							
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2013							
CROSS CONNECTION SURVEY REPORT	3/1/2020							

	Wat	er System Facili	ty and Sampling P	oint Ir	iventoi	ГУ		
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBP
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	Α	Υ			
		CS001	CAF HAND SINK	Α	Υ	1	Υ	
		CS002	NURSES SINK	Α	Υ	1		
		CS003	WF MAIN OFFICE	Α	Υ	1		
		CS004	CAF SINK	Α	Υ	1		
		CS005	RM 210	Α	Υ	1		
		CS005 - RM	GENERATED BY BATCH	Α	Υ			
		CS006	RM 223	Α	Υ	1		
		CS007	RM 237	Α	Υ	1		
		CS007 - RM	GENERATED BY BATCH	Α	Υ			
		CS008	RM 210	Α	Υ	1		
		CS008 - RM	GENERATED BY BATCH	Α	Υ			
		CS009	RM 31	Α	Υ	1		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	<u> </u>			1				
PWS ID	PWS Name			Class	sification	Population	Owner Type	Primary Source
CT0915053	CONSOLIDATED & MEETING HOUSE HILL SCH	IOOL		1	NTNC	1,425	L	GW
Local Address (v	where applicable)	Service	Residen	ntial	Commercia	al Industri	al Combine	ed Agricultural
12 & 24 GILLOT	TI ROAD	Connections	3					

	Water S	ystem Facili	ity and Sampling P	oint In	ventor	У			
Water System Facility ID	Water System Facility	-	Sampling Point Description		Total Coliform Rule	Lead and Copper	Asbestos	WQP	Stage 2 DBPI
		CS009 - RM	GENERATED BY BATCH	А	Υ				
		CS010	RM 108	Α	Υ	1			
		CS011	RM 216	Α	Υ	1			
		CS012	RM 202 L SINK	Α	Υ	1			
		CS013	RM 202 R SINK	Α	Υ	1			
		CS014	RM 201 L SINK	Α	Υ	1			
		CS015	RM 201 R SINK	Α	Υ	1			
		CS016	RM 107	Α	Υ	1			
		CS017	RM 40	Α	Υ	1			
		CS019	RM 104	Α	Υ	1			
		CS020	RM 106	Α	Υ	1			
		CS020 - RM	GENERATED BY BATCH	Α	Υ				
		CS021	RM 107	Α	Υ	1			
		CS022	RM 210	Α	Υ	1			
		CS023	STAFF LOUNGE	Α	Υ	1			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α					
		MHS001	NURSES R RM	Α	Υ	1			
		MHS002	NURSES RM SINK	Α	Υ	1			
		MHS003	COPY RM SINK	Α	Υ	1			
		MHS004	WF RM 405	Α	Υ	1			
		MHS005	CRS R RM 107	Α	Υ	1			
		MHS006	RM 501	Α	Υ	1			
		MHS007	WF CAF #1	Α	Υ	1			
		MHS008	CAF DBL SINK	Α	Υ	1			
		MHS009	G LAV RM 108	Α	Υ	1			
		MHS010	CRS L RM 107	Α	Υ	1			
		MHS011	WF GYM	Α	Υ	1			
		MHS012	WF RM 407	Α	Υ	1			
		MHS013	CRS RM 501	Α	Υ	1			
		MHS014	WF RM 502	Α	Υ	1			
		MHS015	CRS RM 502	Α	Υ	1			
		MHS016	WF CAF #2	Α	Υ	1			
		UPSTREAM	WITHIN 5 SERVICE CON	Α					
	CONSOLIDATED SCHOOL ENTRY POINT	3	CONSOLIDATED SCHOOL	Α					
10440	CONSOLIDATED SCHOOL WELL 1	2	CONSOLIDATED SCHOOL	. A					
52295	CONSOLIDATED SCHOOL WELL 2	2	CONSOLIDATED SCHOOL	. A					
	BLADDER TANKS								

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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Water Quality Monitoring and Compliance Schedule										
PWS ID PWS Name Classification Population Owner Type Primary Sou							Primary Source			
CT0915053	CONSOLIDATED & MEETING HOUSE HILL S	CHOOL			NTNC	1,425	L	GW		
Local Address (where applicable) Service R				ntial	Commerci	al Industri	al Combin	ed Agricultural		
12 & 24 GILLO	Connections	3								

Connecticut Department of Public Health Drinking Water Section

	Water System Facility and Sampling Point Inventory									
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	5.1	Lead and Copper Rule Tier	Asbestos		Stage 2 DBPR	
58609	MHHS TANK									
58611	CS TANK	·	·		· ·	·	·	·		

Certified Operator Information

Water System Fac	cility: DISTR	IBUTION S	YSTEM	(WSF ID: 00600)							
Facility Classification	on: SMALL WA	TER SYSTEM	1						Certification		
Operator Name			Oper	ator Type	Type Certification(s)						
FOLEY, JAMES CHIEF OPERATOR WATER TREATMENT PLANT OPERATOR - CLAS						- CLASS II	3/31/2020				
				Contact Inf	ormation						
Name				Organization	1			Job Title	!		
Mr. Philip A. Ross				New Fairfield	New Fairfield Public Schools Director				B&Grounds		
Mailing Address Lin	e One		Mailing	Address Line Two			City	State	Zip Code		
56 Gillotti Road						New Fai	rfield	СТ	06812		
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress	,			
203-312-5779		203-312-	5780		203-994-0091	pross@new-fairfield.k12.ct.us					
Contact Role(s): A	dministrative	Contact			•						

Contact Noie(s).	ullillistrative	Contact							
Name				Organization	1		Job Title		
Ms. Susan L. Chapr	pman Town of New Fairfield First Selectman				man				
Mailing Address Lin	ie One		Mailing	Address Line Two			City	State	Zip Code
Town Hall			Rt. 39, 4	Brush Hill Road		New Fai	rfield	СТ	06812
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ad	ddress		
203-312-5600		203-312-	5610			schapman@newfairfield.org			
6	10		·		·				

Contact Role(s): Legal Contact

Towns Served: NEW FAIRFIELD

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- If a Collection Period is specified, all water quality samples must be collected during the specified period.
- Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source
CT0915103	HERITAGE PLAZA				NTNC	54	Р	GW
Local Address (v	vhere applicable)	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural
28 ROUTE 39		Connections	21					

Towns Served: NEW FAIRFIELD			-
Monitoring	Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 006	00)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Compliance Status	
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Lead And Copper (PBCU)		5 routine	(RT) per six months
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	7/1/18 - 12/31/18		Complete
	1/1/19 - 6/30/19		Complete
	7/1/19 - 12/31/19		
Physical Parameters (PPS)		1 rou	tine (RT) per month
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
СТ0915103	HERITAGE PLAZA			NTNC	54	Р	GW
Local Address (\	where applicable)	Service	Resident	ial Commerc	ial Industri	al Combine	ed Agricultural
28 ROUTE 39		Connections	21				

Towns Served: NEW FAIRFIELD

Monitoring	Requirements		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 rc	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Oth or Coron	lianaa Cabaalulaa		

	, ,, -									
Other Compliance Schedules										
Compliance Schedule Activity	Due Date	Achieved Date								
SWTS 1: PWS TO RECOMMEND SOWT	6/30/2012									
CCTS 1: PWS TO RECOMMEND OCCT	6/30/2012									
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2012									
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2013									
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2013									
ADDRESS CONTAMINATION	8/17/2018									
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2018									
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2019									
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2019									
CROSS CONNECTION SURVEY REPORT	3/1/2020									

Water System Facility and Sampling Point Inventory Total Lead and

System Water System Facility Sampling Point Sampling Point Coliform Copper Stage
Facility ID ID Description Status Rule Rule Tier Asbestos WQP 2 DBPR

00500 BETWEEN GAC FILTERS

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

PWS ID PWS Name Cla			Cla	ssification	Population	Owner Type	Primary Source	
CT0915103	T0915103 HERITAGE PLAZA				NTNC	54	Р	GW
Local Address (v	vhere applicable)	Service	Residen	itial	Commercia	al Industri	al Combine	ed Agricultural
28 ROUTE 39		Connections	21					

Towns Served: NEW FAIRFIELD

	Water System Facility and Sampling Point Inventory											
Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule		Asbestos	Stage WQP 2 DBPR				
00600	DISTRIBUTION SYSTEM	4	GENERIC DISTRIBUTION	Α	Υ							
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α								
		HP1	OFFICE SINK	Α	Υ	1	Υ					
		HP1 - OFFIC	GENERATED BY BATCH	Α	Υ							
		HP2	KITCHEN DOUBLE SINK	Α	Υ	1						
		HP2 - KITCH	GENERATED BY BATCH	Α	Υ							
		HP3	KITCHEN SINGLE SINK	Α	Υ	1						
		HP3 - KITCH	GENERATED BY BATCH	Α	Υ							
		HP4	LADIES ROOM SINK	Α	Υ	1						
		HP5	NURSERY REST ROOM	Α	Υ	1						
		HP5 - NURSE	GENERATED BY BATCH	Α	Υ							
		HP6	NURSERY KITCHEN	Α	Υ	1						
		HP6 - NURSE	GENERATED BY BATCH	Α	Υ							
		UPSTREAM	WITHIN 5 SERVICE CON	Α								
00700	ENTRY POINT	3	ENTRY POINT	Α								
11012	WELL 2	2	WELL 2	Α								
11013	WELL 3	2	WELL 3	Α								
45134	HERITAGE PLAZA TREATMENT STATION											
60876	ATMOSPHERIC TANK 1											
60878	ATMOSPHERIC TANK 2											

	Certified Operator Information										
Water System Facility:	DISTRIBUTION SYSTEM (WSF	ID: 00600))								
Facility Classification: Operator Name	Operator Ty	ıne	Certification(s)		Certification Expiration						
FOLEY, JAMES	CHIEF OPERA	•	WATER TREATMENT PLANT (3/31/2020							
Water System Facility: HERITAGE PLAZA TREATMENT STATION (WSF ID: 45134)											
Facility Classification:					Certification						
Operator Name	Operator T	<i>уре</i>	Certification(s)	Expiration							
FOLEY, JAMES	CHIEF OPERA	TOR	WATER TREATMENT PLANT OPERATOR - CLASS II		3/31/2020						
Contact Information											
Name		Organizatio	е								

				Contact Ini	ormation					
Name				Organization	Organization			Job Title		
Mr. Camillo Santomero				Lordae Prop	erty Management	Manager				
Mailing Address Line One Mailing Add				ddress Line Two		City		State	Zip Code	
1 New King St Suite 201			-	Wes			NY	10604		
Business Phone	Extension	Fax		Mobile Phone	Emergency Phone	Email Ac	Email Address			
914-448-8300		914-762-2	1730			office@l	ordae.com			

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name						ssification	Population	Owner Type	Primary Source
СТ0915103	103 HERITAGE PLAZA						NTNC	NTNC 54		GW
Local Address (where applicable)		Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural		
28 ROUTE 39				Connections	21					

Towns Served: NEW FAIRFIELD

Contact Role(s): Administrative Contact, Legal Contact, Owner

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

Connecticut Department of Public Health Drinking Water Section Water Quality Monitoring and Compliance Schedule											
PWS ID	PWS Name				ssification	Population	Owner Type	Primary Source			
CT0915203 74 ROUTE 37, LLC					NTNC	130	Р	GW			
Local Address (where applicable)		Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural			

Connections

Towns Served: NEW FAIRFIELD			
Monitorin	g Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00	0600)		
Asbestos (1094)		1 routine	(RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/11 - 12/31/19		Complete
	1/1/20 - 12/31/28		
Total Coliform (3100)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/18 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/20	6/1-9/30	
Physical Parameters (PPS)		1 rout	ine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

	Connecticut Do	epartment of	Public Health	Drink	ing Wa	ater Se	ction	
		•	oring and Com					
PWS ID	PWS Name	<u> </u>		<u> </u>			er Type P	rimary Source
CT0915203	3 74 ROUTE 37, LLC			NTNC	13	30	Р	GW
Local Addr	ress (where applicable)		Service Resident	al Comn	nercial In	dustrial	Combined	Agricultural
			Connections		1			
Towns Ser	ved: NEW FAIRFIELD							
		Monito	oring Requiremen	its				
Water Sys	stem Facility: WELL #1 (W	/SF ID: 10769)						
E. Coli (3	=					1 rou		per quarter
Sampling Point (Sampling Point ID)			Monitorin		Collecti	on Period	Compli	iance Status
WELL	. #1 (2)		10/1/18 - 1					mplete
			1/1/19 - 3				Co	mplete
			4/1/19 - 6	-				
			7/1/19 - 9					
		Other C	ompliance Schedu					
	ce Schedule Activity	_	ue Date		Achieved L	Date		
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE				/29/2016				
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE SUBMIT LEAD CONSUMER NOTICE CERTIFICATE				/29/2017				
	NNECTION SURVEY REPORT	IFICATE		<mark>/29/2018</mark> /1/2020				
CNO33 COI		er System Facili	ity and Sampling I		nventor	'V		
Water	vvac	er System racin	ity and Sampling	Oiiic ii	Total	Lead and		
System	Water System Facility	Sampling Point	Sampling Point		Coliform			Stage
Facility ID		ID	Description	Status	Bulo		Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	А	Υ			
		BRIGHT BEGI	GENERATED BY BATCH	Α	Υ			
		CLASSIC NAI	GENERATED BY BATCH	Α	Υ			
		DOWNSTREAM	WITHIN 5 SERVICE CON	Α				
		UPSTREAM	WITHIN 5 SERVICE CON	Α				
00700	ENTRY POINT	3	ENTRY POINT	Α				
10769	WELL #1	2	WELL #1	Α				
1393	WATER TREATMENT							
		Certified	Operator Informa	ation				
Water Sys	stem Facility: WATER TREA	ATMENT (WSF ID:	1393)					
Facility Cla	assification: CLASS 2 TREATME	ENT PLANT						Certification
Operator I	Name	Operator Typ	e Certification	(s)				Expiration
FOLEY, JAN	MES	CHIEF OPERATO	OR WATER TREA	ATMENT P	LANT OPE	RATOR - CL	ASS II	3/31/2020
		Con	tact Information					
Name		0	rganization				Job Title	

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Mailing Address Line Two

Mobile Phone

203-770-4373

Suite 201

Fax

860-354-8700

Lordae Property Management

Manager

State

NY

Zip Code

10604

City

West Harrison

p6448@aol.com

Emergency Phone Email Address

Mr. Christopher Santomero

Extension

Contact Role(s): Administrative Contact, Legal Contact, Owner

Mailing Address Line One

1 New King St

Business Phone

914-448-8300

Connecticut Department of Public Health	Dr	in	king	z W	/ater	Sec	ction		
Water Quality Monitoring and Compliance Schedule									
DIAGONI	-01			_	1.00	_		<u> </u>	

water Quarty Monitoring and domphance beneaute								
PWS ID	PWS Name			Classification		Population	Owner Type	Primary Source
CT0915203	74 ROUTE 37, LLC				NTNC	130	Р	GW
Local Address (where applicable)		Service	Residential		Commercia	al Industri	al Combine	ed Agricultural
		Connections			1			

Towns Served: NEW FAIRFIELD

Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule